



The North Carolina State Bar Board of Paralegal Certification

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Raleigh, North Carolina 27611
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www.nccertifiedparalegal.org

Application for Designation as a Qualified Paralegal Studies Program

Name of Program: _____

URL: _____

Name of Contact Person: _____

Title of Contact Person: _____

Address: _____

Telephone Number: _____ Fax Number: _____

E-mail address: _____

Is the program an institutional member of the Southern Association of Colleges and Schools (SACS) or other national or regional accrediting agency recognized by the United States Department of Education?
Yes / No

If so, please identify the national or regional accrediting agency and the initial date of membership:

Is the program ABA-approved? Yes / No Date approved: _____

If so, please sign the bottom of this form to verify and return the form.

If not, please complete the rest of this form.

Is the program an institutional member of the American Association for Paralegal Education (AAfPE)?
Yes / No Initial date of membership: _____

Qualified Program Checklist:

Degree(s) Offered:

_____ Associate's Degree Date this degree was initially offered: _____

This option requires at least 60 credit hours, or the equivalent, of general education courses and legal specialty courses. Of the 60 credit hours, at least 18 credit hours, or the equivalent, must be legal specialty courses.

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Students must already have either an Associate's Degree or a Bachelor's Degree which was composed of at least 60 credit hours, or the equivalent, of general education courses and the Certificate Program must consist of at least 18 credit hours, or the equivalent, of legal specialty courses.

For all of the following questions, indicate whether (and when) the answers have changed since the date(s) the degree(s) or certifications noted above were initially offered.

Please attach the catalog for your program and the syllabi for your legal specialty courses. Additional information may be requested.

Title: _____